Article 6

Creating the Simulated Patient Through Dialogue: An Approach Based on Bakhtin's Dialogical Thinking

by

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Abstract

Simulated patients (SP) are being used in medical communication training worldwide. The character of an SP will be trained in advance. However, the dialogue with the student is never fully predictable. The aim of this study was to explore the impromptu interaction between the student and the SP with a focus on the *in situ* building of the SP's character. Three features from Bakhtin's theory of the utterance — addressivity, change of speaking subjects and finalisation — were applied in an abductive analytic approach. We found that the impromptu dialogue between the SP and the student provided different possibilities that may stimulate the creative process in SP character-building. The appliance of the dialogue as part of the simulated character-building may strengthen the simulation and thereby increases students' learning outcomes.

Résumé

Des patients simulés (PS) sont en train d'utilisés dans l'enseignement de la communication médicale partout dans le monde. Le personnage d'un PS sera formé d'avance. Pourtant, le dialogue avec l'étudiant n'est jamais totalement prévisible. Le but de cette étude était d'explorer l'interaction entre l'étudiant et le PS avec une emphase sur la construction *in situ* du personnage du PS. Trois caractéristiques de la théorie de l'énoncé de Bakhtin — l'adressivité, le changement de sujets qui parlent et la finalisation — ont été appliquées selon une approche analytique abductive. Nous avons trouvé que le dialogue impromptu entre le PS et l'étudiant fournissait des possibilités différentes qui pouvaient stimuler le processus creative dans la construction du personnage du PS. L'application du dialogue comme partie de la construction du personnage simulé pourrait renforcer la simulation et donc augmenter les résultats d'apprentissage de l'étudiant.

Resumen

Este artículo investiga el potencial en el significado del concepto de transformación en la educación del arte. Los ejemplos se toman de un proceso de trabajo con profesores de drama en formación de dos universidades en Finlandia poniendo en escena una actuación inspirada por los cuadros y fragmentos del diario del pintor Edvard Munch (1863–1944), siendo *'Dance of Life' (El baile de la vida)* el cuadro específico utilizado al respecto. Los ejemplos del proceso de trabajo de dos grupos diferentes están destinados a aclarar un debate acerca de procesos de aprendizaje al corriente de la idea de transformación como un concepto clave en la educación del

arte. Esto se hace explícitamente para mejorar las reflexiones acerca de opciones pedagógicas y estéticas desde una perspectiva relativa al pensamiento del profesor. Los dos grupos representan respuestas estéticas diferentes a los desafíos de la tarea del curso. El tema del curso en cuestión fue una exploración de la relación entre vida y arte.

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Background

Simulated Patients (SPs) worldwide are currently serving the medical education and the medical field of research. Following Wallace (2007), SPs are used in the areas of history-taking and interviewing skills, physical examination and communication skills, patient education and interpersonal skills.

A general communication training session based on the use of simulated patients is usually made up of two quite different parts. The first is a semi-structured part where the students work from the skill level presently mastered, and the SPs are acting a pre-rehearsed patient and improvise responses to the student's interaction style according to the patient case and framework (Wallace 2007). In other words, the SP role is not only pre-rehearsed, it is also partly created in an impromptu way. In the second part — which usually takes place directly after the first session — the SP, out of role, gives the student verbal feedback on the student's communication skills and interaction style from the point of view of the patient they were portraying and in accordance with the guidelines for feedback which usually are part of the SP's training.

Most of the published literature on SPs' training concerns the training process of the simulated patients ahead of the interaction with the student. Theatrical tools — for example, those borrowed from Stanislavski (1973) — are used for this kind of training: the pre-planned character response (Alraek and Baerheim 2005; Wallace 2007). Some studies underline the importance of realism and credibility in the patient role in order to achieve a sufficient student learning outcome (Kurtz et al. 2005; Mönkkönen et al. 2007; Nestel and Tierney, 2007). However, to our knowledge no study has explored the actual impromptu interaction between the SP and the student, looking at how the dialogue contributes to the development of the patient character. Theoretically based analysis of a particular dialogical approach is also rare.

Following Bakhtin (1986), we propose that fictive characters, as well as real patients and basically all human beings, are 'created' by socio-cultural encounters, in dialogue. The aim of the study was to explore the impromptu interaction between the medical student and the simulated patient with a specific focus on the *in situ* building of the SP's character.

Material and method

The empirical material is constituted from Torild Jacobsen's experiences and observations of nine simulated patients interacting in a one-to-one session with 87 third-year medical students in communication training concerning illness history-taking at the Bergen Medical School, University of Bergen, Norway. Torild Jacobsen participated in developing the case for this occasion, as well as training the nine simulated patients for the task. Torild is an experienced SP and actress. She also watched most of the interactions between the SP and the student simultaneously from a monitor in another room, next to the interacting room. All sessions were videotaped. Data were also provided via verbatim, transcribed, in-depth interviews of two of the participating SPs.

In order to investigate the SP–student dialogue, we found Mikhail Bakhtin's (1986) theory of the utterance useful. This is a theoretical contribution that emphasises how human beings 'create' each other in socio-cultural encounters. Three aspects of the utterance — 'addressivity', 'finalisation' and 'change of speaking subjects' — were chosen as 'hypotheses' to be explored. These hypotheses served as temporary entries to understand the empirical material, and both theory and practice were analysed abductively (Fann 1970). Abduction is a third form of inquiry in addition to the two traditional forms: deduction and induction. Abduction is frequently used within human sciences, as it leads to new knowledge from a qualified 'guess' (theory) as a starting point, where theory and practice are mutually informed (Haugdal 2007).

The abductive process for this context may be described more thoroughly as follows. We studied Bakhtin's theory of the utterance in depth and then watched the SPs in interaction with the students. Subsequently we returned to Bakhtin's theory in order to understand possible recognisable patterns in the interaction. Then we returned to the interactions for new observations with a rereading of Bakhtin in mind. Indeed, the method of abduction may itself be regarded as a dialogue between the new unknown and the experienced known (Haugdal 2007), where both theory and practice mutually affect each other. This exchange also includes the ongoing dialogical process between researcher and theory, and researcher and empirical material, and thus also develops the researchers' understanding.

Bakhtin's theory of the utterance

The idea that human beings mutually contribute to forming each other's identities goes back to the Socratic dialogue. For Bakhtin (1895–1975), philosopher of language, literary critic and social theorist, everything in life is related dialogically to a greater or lesser degree. In a superior perspective, Bakhtin's dialogical thinking is connected to existence: 'Life by its very nature is dialogic.' (Bakhtin 1984: 293) At a fundamental level, he roots his dialogical thinking in the vivid everyday language, in the interaction between two poles minimum, where he considers the *utterance* to be the most important entity when it comes to communication. Bakhtin used the genre of the novel allegorically to investigate fundamental aspects of the uttered word (Holquist 1990). Through the studies of Dostoevsky's novels, Bakhtin develops his dialogical theory:

> I am conscious of myself and become myself only while revealing myself for another, through another, and with the help of another. The most important acts constituting self-consciousness are determined by a relationship toward another consciousness … The very being of man (both external and internal) is the *deepest communion.* To *be* means *to communicate* … To be means to be for another, and through the other, for oneself. A person has no internal sovereign territory, he is wholly and always on the boundary; looking inside himself, he looks *into the eyes of another* or *with the eyes of the another* … I cannot manage without another, I cannot become myself without another; I must find myself in another by finding another in myself … (Bakhtin 1984: 287)

In *The Problem of Speech Genres* (Bakhtin 1986), Bakhtin analyses the importance of the *utterances* for vivid and active speech communication. He elucidates three basic features of the utterance that are non-existent from a monological perspective: (1) addressivity — that is, the utterance is always addressed to someone; (2) finalisation; and (3) change of speaking subjects; both of these are constitutive features in relation to the delimitation and turn-taking of the utterance. We will now briefly illuminate these features for the purpose of applying them in an SP–medical student communication training context.

Addressivity

There is no utterance that is not directed to someone. Whereas *sentences* are unanswerable, belonging to nobody (Bakhtin 1986), the *utterance* (the written as well as the spoken) is always addressed to someone: 'An essential (constitutive) marker of the utterance is its quality of being directed to someone, its *addressivity*.' (Bakhtin 1986: 95) Bakhtin departs from general linguistics by placing equal importance upon speaker and listener, and thereby emphasising the active listener's response in shaping the utterance:

> Both the composition and, particularly, the style of the utterance depend on those to whom the utterance is addressed, how the speaker (or writer) senses and imagines his addressees, and the force of their effect on the utterance. (1986: 95)

The receiver's *response* (or *imagined* response) is what contributes to the formulation of the speaking subject's utterance. To respond in this context is not restricted to including only a reply; rather, it involves a response/answer to be understood in the widest sense possible, as an actively responsive *understanding* which might also lead to a speech act (Bakhtin 1986).

This creates a reflexivity in the dialogue that separates Bakhtin from Saussurean influenced linguists, who in his opinion had a tendency to ignore the other's (active) role in the speech communication. Bakhtin rejects this thinking as 'scientific fiction' (Bakhtin 1986: 68), and his main argument is that by defining the participants in the conversation from two locked positions as speaker and listener, the complexity of the situation is simplified: 'The fact is that when the listener perceives and understands the meaning (the language meaning) of speech, he simultaneously takes an active, responsive attitude toward it.' (Bakhtin 1986: 68)

Bakhtin's retort to the Saussurean view on language was his *metalinguistics*. Metalinguistics relates to language in the sphere where discourse lives an authentic life, and where the utterance is created in the intersection of a speaker's specific intent and a listener's active response. Bakhtin does not primarily investigate the language as an individual development of our 'selves' (Smidt 1999: 89–99) in the Socratian sense. He investigates the dialogue with different linguistic mechanisms in the actual interaction as starting points, and claims that our *utterance* is created through an interplay and 'any utterance is a link in the chain of speech communication' (Bakhtin 1986: 84).

Addressivity in the character-building of the SP in dialogue with medical students

An interaction between an SP and a medical student is not a completely fictitious dialogue, like a scenic dialogue. Students test their competence as doctors, but not in a game that demands that the person concerned takes on a role outside of themself. Neither is the interaction a non-fiction. An interaction between an SP and a student in the name of clinical skills assessment and learning — the way it usually takes place — is an intended, partly planned and partly impromptu incident where the SP's utterances are created in dialogue with the student, and where the SP gives feedback out of role once the interaction has ended. In this first session, the two actors find themselves on different levels of fiction: the SP *represents* a specific patient and the medical student is interacting with the SP as him or herself, utilising his or her professional self. The utterances that the student addresses to the simulated patient will bear the seeds of an answer, an actively responsive understanding or a response. The words that are exchanged between the two actors might be seen as a bridge thrown between them (Volosinov 1986). We wonder whether and how this bridge may shape the SP's responses, and hence help the character-building.

'Language moves in multiple directions simultaneously'

'I just respond in the way I consider appropriate,' was one SP's reflection on what triggered her answers when in role as a patient. This indicates that some SPs adjust the character to what they find appropriate in the setting. The flexible adaptability is what Wallace calls 'the SP's improvisational framework': 'The SP must respond to whatever the medical student spontaneously does during the clinical encounter.' (Wallace 2007: 47) This is the starting point for the interaction between the SP and the student and, seen in connection with addressivity, this means that when an SP is the addressee of the student's inquiry, the SP directs a response that is in line with what he or she finds appropriate for the patient case. This might be considered the *first* layer of addressivity, where the SP is the addressee and the student is the one posing the question. The SP will in most cases make an adequate response to the utterance. This will be the most obvious, uncomplicated and immediate way of responding to the utterance.

However, the flexible and adaptive SP supports not only that the dialogue influences the SP's response heavily, but also that the SP enacts following a meta-view of the encounter. The same meta-view was revealed by another simulated patient, whose experience was that the student kept up a very high pace throughout the session. She reminded herself, in the middle of this act, that she had to remember this so that she could make the student aware of it in the feedback session after the interaction. The same meta-reflection was relevant in the case of an SP who, during the course of the conversation, perceived the student as 'inadequate'. Upon this reflection, the SP thought: 'This was not good enough, I must not forget to mention this during the feedback.' This aspect of addressivity is a little more complex than the first addressivity described above. The reminder from the SP to herself in this situation — that is, *inner simultaneous speech* — is speech directed back to the SP's own self; it is a parallel double track that addresses two different aspects of the attention. An SP put it this way: 'You have to use your head and your heart at the same time.' This indicates that utterances cause different levels of response, including concealed and disparate parts of the character; referring to Bakhtinian thinking, this can be described as 'language moves in multiple directions simultaneously' (Landay 2004: 108).

Additionally, we have identified a third, more radical consequence of the addressivity of the utterance: what is manifested as a response in a (for the SP) new *way of behaving*. A whole new side of one's personality emerges as an immediate reaction to an addressed and unexpected utterance. This is indicated by the following. One SP told us about a student who had gone beyond the framework. Before the session, the student had decided to use a different story than the one given in the SP and student manual/learning goals. This student had made up a whole new story regarding the patient's case history. What he presented to the SP was considerably more dramatic than the narrative given in the manual. This was obviously a challenging situation for the SP. The videotape of this session revealed that she was clearly surprised, but was still able to respond in line with the situation. This involved her showing new sides of the patient character. The SP confirmed this herself after the session. She was determined not to break with the simulation. By not breaking the fiction, we observed that she gave the student a challenge in return. The degree of unexpectedness in the situation turned out to yield a mutual challenge: the student was challenged on his identity as a doctor, the SP in relation to the simulated character.

> At this point he [the student] is upsetting Guri Jonsen [the fictional name of the SP] and it is of course partly a game, and I can see by the look on his face that I [in role] have reacted in a way that he did not predict' [from an interview with the SP].

To sum up, an addressed utterance from a student to an SP might take three different directions: (1) the direct utterance from the student to the SP, which brings about an immediate answer; (2) The utterance that the SP addresses back to him or herself as inner speech; and (3) The radically unexpected utterance from the student that the SP might use in order to expose 'the unexpected' as a part of the fictional personality verbally and/or physically.

Change of speaking subjects and finalisation

Bakhtin claims that it is the actual change of speaking subjects that defines the *limits* of the utterance. This change of speaking subjects is connected to the specific *finalisation* of the utterance. We will here describe and analyse these two characteristics of the utterance as one, since we consider them to be mutually connected. According to Bakhtin, a change of speaking subjects occurs when the first speaker has had his or her finalisation (Bakhtin 1986: 76). This might be completed with three different conditions: (1) semantic exhaustiveness of the theme; (2) the speaker's plan or speech will; and (3) typical compositional and generic forms of finalisation. By semantic exhaustiveness, we mean both *thematically* and/or according to the subject area (Bakhtin stresses that this point will vary considerably within different spheres of speech communication).

The second aspect guaranteeing an answer or a responding position, the speaker's speech *plan* or speech *will*, is closely related to the objective side of the utterance, its semantic aspect. According to Bakhtin, the utterance itself might contain two such expressions: a personal, subjective aspect and a professional, objective aspect. The subjective aspect he relates to the speaking subject's speech plan or 'emotional speech plan', whereas the objective is connected to the thematically aspect.

The third aspect, the typical compositional and generic forms of the utterance, is connected to the *genre* of the utterance. Bakhtin stresses that the speaker's speech will and speech plan always appear in specific generic forms, although we are seldom aware of it. We use speech genres in all kinds of speech communication spheres, not as a conscious choice but rather automatically.

The three aforementioned points regarding the finalisation of the utterance might be summarised into one sentence: only when the speaking subject's utterance, manifested in a specific genre, is semantically/thematically exhausted according to the subject's speech will or plan will it be possible for the addressee to answer or assume a responding position.

A teaching situation with a simulated patient and a medical student might be said to belong to a separate genre since, on a meta level, it can be seen as a question/answer genre where the student poses the questions and the SP answers. In addition, this is not an everyday conversation between two peers; the clinical conversation will mostly be directed towards the doctor's interpretation and mediation of the clinical situation, and the patient will be the one seeking advice. In an intended improvised teaching situation with an SP, the SP will have more room for shaping their answers than a normal patient would. At the same time, the SP is only partly free to shape his or her character during the dialogue. In the following, we examine the two characteristics *change of speaking subjects* and *finalisation* in the dialogue, with particular emphasis on the character-building of the simulated patient.

In a dialogue between a simulated patient and a medical student, they take turns being the speaking subject, but Bakhtin's three points connected to the finalisation of the utterance seem to be more complex than Bakhtin implies. He portrays any speech communication from the starting point of a sort of ideal situation where a type of 'refined order' rules. Our videotapes of the

students and the SPs showed nuances and variations that contradicted this order, and it was in this field outside of the theory that we found tendencies contributing to the shaping of the character.

Possibilities produced by forced and delayed temporality

The first result of the analysis concerns a shift in the SP's response to the student's utterance. The shift concerned both a *delayed* response and a *forced* response. A delayed response occurred in the *breaks* after the first speaker's finalisation and before the SP took over as the speaking subject.

> *The student (towards the end of the conversation): Okay, so I guess we are done here then ...?*
>
> *[Pause]*
>
> *SP: Yes ...? (insecurely glancing around the room)*
>
> *[Pause]*
>
> *Student:... or is there anything else ... do you have any other concerns ... or ...?*
>
> *[Pause]*
>
> *SP: ... well ... [squirming in her chair]*

During the breaks, the SP had the *time* to show anxiety due to the situation by squirming in her chair, changing position, looking nervously around the room and clearing her throat. There was little room for these nuances in the physical expression during the verbal dialogue, when the words rather than the body language dominated. The breaks thus contributed to the triggering of the physical character behaviour and to exposing the personal features more *clearly* than those that emerged during the conversation.

The other tendency that we observed is connected to the forced response — that is, when the student made him or herself a speaking subject, with both a verbal and/or non-verbal response *before* the SP had made her finalisation:

> *Student: What was initially the nature of your pain?*
>
> *SP: It started out ...*
>
> *[Student nods several times]*
>
> *SP: with ... this ...*
>
> *[Student nods and smiles]*
>
> *SP: this ... pain ... in this area ... [using her hand to illustrate]*
>
> *Student: Okay, right there below the ribs?*
>
> *SP: Yes.*

A forced response requires more determination for the SP to unfold. Thus, as far as the SP's character building goes, a delayed or forced response yields different possibilities.

Both of these examples show different tendencies in the dialogue between the student and the SP than is usually seen in this pedagogical setting. The dialogue between the SP and the student usually unfolds in line with Bakhtin's ideal situation for the dialogue; the student's finalisation ends the utterance, and the SP takes over as the speaking subject by answering the question.

Following Wallace (2007), '[the SPs] can improvise responses to the medical student's inquiries, based in part on the student's interaction style' (2007: 6). What is emphasised here is the SP's improvisational framework. Our findings might be considered as *possibilities* that might be used both in the training of new patient cases and as possibilities for the SP in the character-building during the actual interaction. By taking advantage of the delay (break), the SP will be able to add different nuances of a non-verbal character. A particularly shy and secluded patient will, for instance, use infinite amounts of time before giving his or her answer to the student, and the patient will be able to choose to use the pause this produces to display insecurity, unrest and anxiety.

In the opposite case, the patient who wishes to display persistence, rudeness or eagerness will be able to use the opportunity to take over as a speaking subject before the finalisation of the student. Hence, by making use of temporality — forced or delayed — the SP has the opportunity to keep developing the character in the direction that will be appropriate according to 'the student's interacting style' and the patient case.

Summing up

Bakhtin turned to the fictional world (Dostoevsky's novels) to elucidate his three main theories; carnivalism, intertextuality and utterance theory. He used these fictional dialogues as empirical material to elucidate theories concerning live speech and live utterances. An important contribution concerning the utterance theory was Bakhtin's claim that utterances always belong to and are addressed to someone, whereas sentences are unanswerable, belonging to nobody (Bakhtin 1986).

In a somewhat similar yet reverse way, we have applied Bakhtin's theory to understand not a fictional world, but a fiction-based context between an SP and a medical student, in order to explore the live dialogue between them. To do this, we applied three basic features of the utterance — addressivity, finalisation and change of speaking subjects — for our analytic purpose.

We found three different directions for the simulated patient's utterance concerning the dialogue's addressivity: (1) the direct utterance from the student to the SP, which brings about an immediate response; (2) the utterance which the SP addresses back to herself as inner speech; and (3) the fully unpredictable utterance from the student that the SP might use to expose 'the unexpected' as part of the fictional personality, both verbally and physically/non-verbally. Findings concerning finalisation and change of speaking subjects were related to the forced or delayed response of the utterance, which may give two very different possibilities for the SPs in their character-building in the *in situ* dialogue with the student.

Bakhtin's theory of the utterance gave us a useful foundation to understand how the dialogue affects the development of the SP character, which opens new possibilities for the SP character-building. In addition to the pre-rehearsed part (for the SP), we found that the impromptu interaction with the student supports and further develops the SP. However, in applying Bakhtin's theory we found that his contribution depicted an ideal dialogical situation, which was challenged by our data and analysis. Aspects other than the spoken 'utterance' came to be influential, such as the interacting person's body language. The addressee's body language response (gestures, facial signals, gaze, etc.) on the speaking subject's utterance provides an opportunity for further research connected to character-building.

In this article, we chose to focus on the simulated patient. Following Bakhtin, the next step for further research could be a specific focus on medical students' *professional* identity-

building in and by the dialogue, including the notion of the *other* (Bakhtin 1986) as one analytical tool.

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